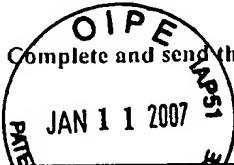


## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23125 7590 10/18/2006  
**FREESCALE SEMICONDUCTOR, INC.**  
**LAW DEPARTMENT**  
**7700 WEST PARMER LANE MD:TX32/PL02**  
**AUSTIN, TX 78729**

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Stacie Herrera	(Depositor's name)
<i>Stacie Herrera</i>	(Signature)
January 11, 2007	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/806,498	03/23/2004	Micu Van Vu	SC12998TH	2772

TITLE OF INVENTION: METHOD AND APPARATUS FOR ENTERING A LOW POWER MODE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/18/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
L.E. NHANT	2618	455-343000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.	<input type="checkbox"/> Susan C. Hill  2. _____  3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Freescale Semiconductor, Inc.

Austin, TX

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:	4b. Payment of fee(s): (Please first reapply any previously paid issue fee shown above)
<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check is enclosed.
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5. Change in Entity Status (from status indicated above)	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).
<input type="checkbox"/> a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	<input type="checkbox"/>

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Authorized Signature Susan C. Hill

Date 1/11/07

Typed or printed name Susan C. Hill

Registration No. 35,896

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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# FACSIMILE

## LAW DEPARTMENT FREESCALE SEMICONDUCTOR, INC.

DATE: January 11, 2007

TO: MS: ISSUE FEE (571) 272-2885  
(ADDRESSEE) (EXTENSION)

USPTO (571) 273-2885  
(LOCATION) (FAX NUMBER)

FROM: Stacie Herrera for Susan C. Hill (512) 996-6848  
(SENDER) (EXTENSION)

TOTAL NUMBER OF PAGES 3 (including this page)

IF YOU HAVE ANY TROUBLE OR QUESTIONS WITH TRANSMISSION, OR HAVE RECEIVED IT IN  
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Docket No.: SC12998TH

Applicant: Mieu Van Vu et al

Serial No.: 10/806,498

Art Unit: 2618

Filed: March 23, 2004

ALL ITEMS MARKED WITH AN "X" ARE INCLUDED:

1.	x	1 page Facsimile Cover Sheet
2.	x	1 page PTOL-85B Issue Fee Transmittal (in duplicate)

Paid by Deposit Account 503079, Freescale Semiconductor, Inc: \$1700

If Applicant has overlooked any additional fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit Account 503079, Freescale Semiconductor, Inc.

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS  
 BEING FACSIMILE TRANSMITTED TO THE PATENT AND TRADEMARK OFFICE:

ON: 1/11/07

Date

Signature

FREESCALE LAW DEPARTMENT  
 7700 W. PARMER LANE MD: TX32/PL02  
 AUSTIN, TEXAS 78729  
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